## Case 3:17-bk-30864 Doc 24 Filed 06/11/19 Entered 06/11/19 10:17:52 Desc Main Document Page 1 of 2

Fill	in this information t	o identify your ca	ase:						
Del	btor 1	Randy LaVa	rnia						
1	btor 2 buse, if filing)	Mary-Lee La	Varnia						
Uni	ited States Bankrup	tcy Court for the	SOUTHERN DISTRIC	T OF OH	Ю				
Case number (If known)						Check if this is:  An amended filing  A supplement showing postpetition chapter			
_								as of the following date:	
	fficial Form		MM / DD/ YYYY						
S	chedule I:	Your Inc	ome					12/15	
atta Pa	ch a separate she	et to this form.						use. If more space is needed, (nown). Answer every question	
1.	Fill in your employment information.			Debtor 1			Debtor 2 or non-filing spouse		
	If you have more	e page with	Employment status	■ Employed			☐ Employed		
	attach a separate information about		Employment status	☐ Not employed  Assembler			Not employed  Homemaker		
	employers.		Occupation						
	Include part-time, self-employed wo		Employer's name	Navist	ar Inc.				
	Occupation may i or homemaker, if		Employer's address	_	lavistar Drive IL 60532				
			How long employed to	here?	4		_		
Pai	rt 2: Give De	tails About Mor	thly Income						
	mate monthly incouse unless you are		ate you file this form. If	you have	nothing to report for any	line, writ	e \$0 in the	space. Include your non-filing	
	ou or your non-filing e space, attach a se			ombine the	e information for all emp	loyers fo	r that perso	n on the lines below. If you need	
						For De	ebtor 1	For Debtor 2 or non-filing spouse	
2.			ry, and commissions (becalculate what the month)			5 4	4,656.00	\$ 0.00	

Official Form 106I Schedule I: Your Income page 1

3.

4,811.00

9,467.00

+\$

\$

0.00

0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

## Case 3:17-bk-30864 Doc 24 Filed 06/11/19 Entered 06/11/19 10:17:52 Desc Main Document Page 2 of 2

	tor 1 tor 2	Randy LaVarnia Mary-Lee LaVarnia		Case i	number ( <i>if known</i> )		
				For Debtor 1			btor 2 or ing spouse
	Cop	y line 4 here	4.	\$	9,467.00	\$	0.00
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,255.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$_	560.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	96.46	\$	0.00
	5e.	Insurance	5e.	\$	166.83	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	70.00	\$	0.00
	5h.	Other deductions. Specify:	_ 5h.+	- \$	0.00	+ \$	0.00
<b>3</b> .	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,148.29	\$	0.00
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	6,318.71	\$	0.00
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	394.00	\$	0.00
	8d.	Unemployment compensation	8d.	\$ 	0.00	\$	0.00
	8e.	Social Security	8e.	\$_	0.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	* *	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00
	8h.	Other monthly income. Specify:	8h.+	- \$		+ \$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	394.00	\$	0.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	(	5,712.71 + \$_	0	0.00 = \$ 6,712.71
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule are contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	,	,	•	edule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$ <b>6,712.71</b>
							Combined
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monthly income

No.
 Yes. Explain: Debtors do not reasonably anticipate any increase or decrease in income to occur within the year

Official Form 106I Schedule I: Your Income page 2

following this filing except that overtime work is likely to substantially decreased